

U.S. Postal Service

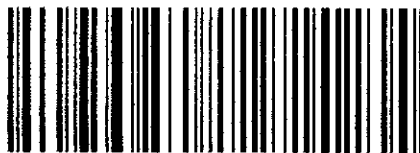
**CERTIFIED MAIL RECEIPT**

(Domestic Mail Only: No Insurance Coverage Provided)

**CERTIFIED MAIL**

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

4466 2469 8000 0752 1002  
4466 2469 8000 0752 1002



**OFFICIAL USE**

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark  
Here

*RE ISSUED*

Sent To

*William K. Kland*

Street, Apt. No.,  
or PO Box No.

*1335 Compton Rd.*

City, State, Zip

*Cincinnati Ohio 45231*